

RETURN ADDRESS



200407160087

Skagit County Auditor

7/16/2004 Page

1 of

2 11:45AM

**MANUFACTURED HOME
APPLICATION****PLEASE CHECK ONE**

- ☒ TITLE ELIMINATION
☐ TRANSFER IN LOCATION
☐ REMOVAL FROM REAL PROPERTY

Anyone who knowingly makes a false statement of a material fact is guilty of a felony, and upon conviction may be punished by a fine, imprisonment, or both. (RCW 46.12.210)

1 MANUFACTURED HOME

TPO / PLATE NUMBER YEAR MAKE LENGTH/WIDTH(FEET) VEHICLE IDENTIFICATION NUMBER (VIN)
1298351 2003 MARLE 56X60 H021978

2 LAND

LEGAL DESCRIPTION ON PAGE

MANUFACTURED HOME WILL BE ☒ AFFIXED ☐ REMOVED

REAL PROPERTY TAX PARCEL NUMBER

P119082

LOT BLOCK PLAT NAME SECTION/TOWNSHIP/RANGE
1 N/A SP 97-031 35-36-4

3 GRANTOR(S) REGISTERED/LEGAL OWNER(S)

ADDITIONAL NAMES ON PAGE

COUNTY NUMBER NUMBER OF REGISTERED OWNERS NUMBER OF LEGAL OWNERS
2 2

NAME OF REGISTERED OWNER

William Brown

NAME OF ADDITIONAL REGISTERED OWNER

Mary Alice Brown

ADDRESS CITY STATE ZIP CODE
22394 Nita Lane, Sedro-Woolley, WA 98284-5057

NAME OF LEGAL OWNER

William Brown

NAME OF ADDITIONAL LEGAL OWNER

Mary Alice Brown

ADDRESS CITY STATE ZIP CODE
22394 Nita Lane, Sedro-Woolley, WA 98284-5057

GRANTEE

NAME

I DO SOLEMNLY ATTEST UNDER PENALTY OF PERJURY THAT I / WE AM/ARE THE REGISTERED OWNER(S) OF THIS VEHICLE AND THIS INFORMATION IS ACCURATE:

Signature of Registered Owner and Title, IF APPLICABLE

Signature of Additional Registered Owner and Title, IF APPLICABLE

NOTARY SEAL OR STAMP

NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE

State of Washington
County of

Signed or attested
before me on

by
PRINT NAME OF REGISTERED OWNER

Signature
NOTARY OR AGENT

by
PRINT NAME OF REGISTERED OWNER

PRINTED NAME OF NOTARY

Title
DEALERSHIP POSITION/AGENT/NOTARY

AND:
County/Office No. OR
Dealer No. OR
Notary Expiration Date

4 TITLE COMPANY CERTIFICATION

I certify that the legal description of the land and ownership is true and correct per the real property records.

NAME (TYPED OR PRINTED)

TITLE COMPANY / PHONE NUMBER

SIGNATURE / POSITION

DATE

Finalize this application with a Licensing Agent within 10 calendar days of the date Title Company Representative signs.

5 BUILDING PERMIT OFFICE CERTIFICATION

I certify that: ☒ the manufactured home has been affixed to the real property as described.
☐ a building permit has been issued for this purpose and the attachment will be inspected upon completion.

NAME (TYPED OR PRINTED)

BLDG PERMIT OFFICE/PHONE #

BLDG PERMIT #

Georgine Besson

SKAGIT COUNTY PERMIT CENTER 336-9410

BP03-0549

SIGNATURE / POSITION

Georgine Besson Permit Technician

DATE

7/16/04

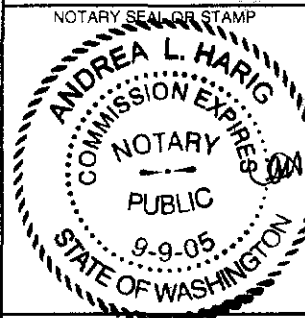
6 SIGNATURE OF LEGAL OWNER

SIGNATURE OF LEGAL OWNER INDICATES CONSENT FOR ELIMINATION OF TITLE / REMOVAL FROM REAL PROPERTY.

Signature of Legal Owner and Title, IF APPLICABLE

William C Brown

Signature of Additional Legal Owner and Title, IF APPLICABLE

Mary Alice Brown**NOTARIZATION/CERTIFICATION FOR LEGAL OWNER(S) SIGNATURE**State of Washington
County ofSkagitSigned or attested
before me on6-28-04by William C Brown
PRINT NAME OF LEGAL OWNERSignature [Signature]
NOTARY OR AGENTby Mary Alice Brown
PRINT NAME OF LEGAL OWNERPRINTED NAME OF NOTARY Andrea L. HarigTitle Notary Public
DEALERSHIP POSITION AGENT/NOTARYAND: County/Office No. OR 9/9/05
Dealer No. OR
Notary Expiration Date**7 LAND DESCRIPTION (A legal description of the land can be obtained from the local County Assessor's Office)****8 DEALER'S REPORT OF SALE**I CERTIFY THAT THIS INFORMATION IS CORRECT. THE VEHICLE IS CLEAR OF ENCUMBRANCES EXCEPT AS SHOWN.
ANY REQUIRED SALES TAX HAS BEEN COLLECTED.

DEALER NAME (TYPED OR PRINTED)

WA DEALER NUMBER

DATE OF SALE

PURCHASE PRICE

TAX JURISDICTION/TAX RATE

DEALER'S AUTHORIZED SIGNATURE

☐ **USE TAX EXEMPT** Sale to a Certified Tribal member on the reservation (attach notarized statement of delivery).**9 COUNTY AUDITOR/AGENT LICENSING OFFICE APPROVAL: (Not for use by Subagents)**

I certify that the above application appears to have been completed correctly, and the applicant has sufficient documentation to proceed with the recording of this form.

NAME (TYPED OR PRINTED)

COUNTY OFFICE/VFS OPERATOR NUMBER

SIGNATURE

DATE

10 TITLE FEES

FILING FEE

APPLICATION

MOBILE HOME FEE

ELIMINATION FEE

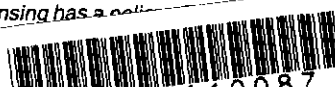
USE TAX

SUBAGENT FEES

TOTAL FEES & TAX

IMPORTANT: Once the application has been approved by the County Auditor / Vehicle Licensing Office, take your application form to the County Recording Office. Retain proof of the recording fees paid. If the Recording Office retains your original application form, obtain a certified copy of the recorded form.**APPLICANTS:** Once recorded, you must return to a Vehicle Licensing office to file the Manufactured Home Application, paying all required fees. Vehicle licensing subagents charge a service fee.

For full instructions on completing this form for Title Elimination, Removal from Real Property or Transfer in Location, see form TD-420-730, Manufactured Home Application Instructions.

The Department of Licensing has a toll-free
If you need specices.
164-8885.200407160087
Skagit County Auditor